

**RECEIVED
CENTRAL FAX CENTER****MAY 24 2005****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application:

Hart et al.

U.S. Serial No.: 10/664,698

Filed: September 18, 2003

For: **SURGICAL INSTRUMENTS WITH
IMPROVED TRACTION**

Customer No.: 21378

Docket No.: CBUS-1631-AV

Art Unit: 3731

Dear Sirs:

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office (Fax No. (703) 872-9306) on May 24, 2005.	
Barbara Johnson (Type or print name)	<i>Barbara Johnson</i> (Signature)

Attached please find the following documents submitted for filing in reference to
the above-referenced application.

1. Information Disclosure Statement;
2. PTO Form SB/08a; and
3. Transmittal.

Respectfully submitted,

Barbara Johnson
Barbara Johnson
Applied Medical Resources

CUSTOMER NO.: 21378

Telephone (949) 713-8000

Facsimile (949) 713-8206

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Mail Stop Amendment
Commissioner for Patents
Alexandria, VA 22313-1450
Facsimile No.: (703) 872-9306

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

Enclosed please find a copy of PTO/SB/08a which lists information which may be relevant to the prosecution of the above-captioned application. It is requested that this information be considered by the Office.

This Statement is being submitted under the terms of 37 C.F.R. § 1.97(b). The information is being filed before the mailing of a first Office Action on the merits. Therefore, it is believed no fee is due.

Under 37 C.F.R. § 1.97(h), it is understood that filing of the Information Disclosure Statement does not constitute an admission that the information submitted is material to patentability.

The Commissioner is hereby authorized to charge any fee deficiency, or credit any over-payment, to our Deposit Account No. 01-2215.

Respectfully submitted,



Kenneth K. Vu
Attorney for Applicant
Registration No. 46,323

Date: May 23, 2005

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~~Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.~~

Application Number	10/664,698
Filing Date	September 18, 2003/03
First Named Inventor	Charles C. Hart
Art Unit	3731
Examiner Name	Not yet assigned
Attorney Docket Number	CBUS-1631-AV

PAGE 3/44 * RCVD AT 5/24/2005 1:48:55 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/2 * DNIS:8729306 * CSID:949 713 8206 * DURATION (mm:ss):13:50

PTO/SB/21 (02-04)


Approved for use through 07/31/2008, OMB 0651-0031

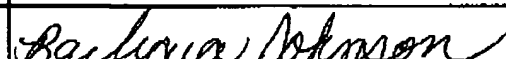
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/684,698	
	Filing Date	September 18, 2003	
	First Named Inventor	Charles C. Hart	
	Art Unit	3731	
	Examiner Name	Not yet assigned	
Total Number of Pages in This Submission	44	Attorney Docket Number	CBUS-1631-AV

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): copies of three (3) references
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or individual name	Kenneth K. Vu
Signature	
Date	May 23, 2005

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Barbara Johnson
Signature	
Date	May 24, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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